

House Bill 61

By: Representative Powell of the 29th

A BILL TO BE ENTITLED

AN ACT

To amend Chapter 7 of Title 31 of the Official Code of Georgia Annotated, relating to health care facilities, so as to provide a short title; to provide definitions; to require certain reports by hospitals and ambulatory surgical centers concerning hospital acquired infections; to require certain reports by the Department of Human Resources; to provide for an advisory committee and its membership and duties; to provide for sanctions for failure to make reports; to provide for enforcement; to provide for sanctions for violations; to provide for privacy; to provide for publication and availability of such reports; to authorize the department to promulgate rules and regulations; to provide for related matters; to repeal conflicting laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

SECTION 1.

Chapter 7 of Title 31 of the Official Code of Georgia Annotated, relating to health care facilities, is amended by adding a new Article 16 to read as follows:

"ARTICLE 16

31-7-430.

This article shall be known and may be cited as the 'Hospital Infections Disclosure Act.'

31-7-431.

As used in this article, the term:

(1) 'Ambulatory surgical center' means any building or facility, not under the operation or control of a hospital, which is primarily devoted to the provision of surgical treatment to patients not requiring hospitalization and which is classified by the department as an ambulatory surgical treatment center.

(2) 'Department' means the Georgia Department of Human Resources.

(3) 'Hospital' means any building, facility, or place in which are provided two or more beds and other facilities and services that are used for persons received for examination, diagnosis, treatment, surgery, maternity care, nursing care, or personal care for periods continuing for 24 hours or longer and which is classified by the department, as provided for in this chapter, as a hospital.

(4) 'Hospital acquired infection' means a localized or systemic condition that:

(A) Results from adverse reaction to the presence of an infectious agent or agents or its toxin or toxins; and

(B) Was not present or incubating at the time of admission to the hospital or ambulatory surgical center.

31-7-432.

(a) Individual hospitals and ambulatory surgical centers shall collect data on hospital acquired infection rates for the specific clinical procedures determined by the department by rule and regulation, including the following categories:

(1) Surgical site infections;

(2) Ventilator associated pneumonia;

(3) Central line related bloodstream infections;

(4) Urinary tract infections; and

(5) Other categories as provided under subsection (d) of this Code section.

(b)(1) Hospitals and ambulatory surgical centers shall submit quarterly reports on their hospital acquired infection rates to the department. Quarterly reports shall be submitted, in a format set forth in rules and regulations promulgated by the department, to the department by April 30, July 31, October 31, and January 31 of each year for the previous quarter. Data in quarterly reports must cover a period ending not earlier than one month prior to submission of the report. Quarterly reports shall be made available to the public at each hospital and ambulatory surgical center and through the department. The first quarterly report shall be due July 31, 2007.

(2) If the hospital or ambulatory surgical center is a division or subsidiary of another entity that owns or operates other hospitals, ambulatory surgical centers, or related organizations, the quarterly report shall be for the specific division or subsidiary and not for the other entity.

(c)(1) The commissioner of human resources shall appoint an advisory committee which shall include representatives from public and private hospitals and ambulatory surgical centers, including representatives of hospital and ambulatory surgical center infection control departments; direct care nursing staff; physicians; epidemiologists with expertise in hospital acquired infections; academic researchers; consumer organizations; health

1 insurers; health maintenance organizations; and purchasers of health insurance, such as
2 employers. The advisory committee shall have a majority of members representing
3 interests other than hospitals.

4 (2) The advisory committee shall assist the department in the development of all aspects
5 of the department's methodology for collecting, analyzing, and disclosing the information
6 collected under this article, including collection methods, formatting, and methods and
7 means for release and dissemination.

8 (3) In developing the methodology for collecting and analyzing the infection rate data, the
9 department and advisory committee shall consider existing methodologies and systems for
10 data collection, such as the Centers for Disease Control and Prevention's National
11 Nosocomial Infections Surveillance System, or its successor; however, the department's
12 discretion to adopt a methodology shall not be limited or restricted to any existing
13 methodology or system. The data collection and analysis methodology shall be disclosed
14 to the public prior to any public disclosure of hospital acquired infection rates.

15 (4) The department and the advisory committee shall evaluate on a regular basis the quality
16 and accuracy of hospital and ambulatory surgical center information reported under this
17 article and the data collection, analysis, and dissemination methodologies.

18 (d) The department may, after consultation with the advisory committee, require hospitals
19 and ambulatory surgical centers to collect data on hospital acquired infection rates in
20 categories additional to those set forth in subsection (a) of this Code section.

21 31-7-433.

22 (a) The department shall annually submit to the General Assembly a report summarizing the
23 hospital and ambulatory surgical center quarterly reports and shall publish the annual report
24 on its website. The first annual report shall be submitted and published on or before July 1,
25 2008. The department may issue quarterly informational bulletins at its discretion,
26 summarizing all or part of the information submitted in the hospital and ambulatory surgical
27 center quarterly reports.

28 (b) All reports issued by the department shall be risk adjusted.

29 (c) The annual report shall compare the risk adjusted hospital acquired infection rates,
30 collected under Code Section 31-7-432, for each individual hospital and ambulatory surgical
31 center in this state. The department, in consultation with the advisory committee, shall make
32 this comparison as easy to comprehend as possible. The report shall also include an
33 executive summary, written in plain language, that shall include, but not be limited to, a
34 discussion of findings, conclusions, and trends concerning the overall state of hospital
35 acquired infections in this state, including a comparison to prior years. The report may
36 include policy recommendations, as appropriate.

(d) The department shall publicize the report and its availability as widely as practical to interested parties, including, but not limited to, hospitals, providers, media organizations, health insurers, health maintenance organizations, purchasers of health insurance, consumer or patient advocacy groups, and individual consumers. The annual report shall be made available to any person upon request.

(e) No hospital or ambulatory surgical center report or department disclosure may contain information identifying a patient, employee, or licensed health care professional in connection with a specific infection incident.

31-7-434.

It is the intent of the General Assembly that a patient's right of confidentiality shall not be violated in any manner. Patient social security numbers and any other information that could be used to identify an individual patient shall not be released notwithstanding any other provision of law to the contrary.

31-7-435.

(a) A determination that a hospital or ambulatory surgical center has violated the provisions of this article may result in any of the following:

(1) Revocation or suspension of permits to operate; and

(2) Civil penalties of up to \$1,000.00 per day per violation for each day the hospital or ambulatory surgical center is in violation of this article.

(b) Such determinations shall be made in accordance with Article 1 of Chapter 5 of this title.

31-7-436.

(a) The department shall be responsible for ensuring compliance with this article as a condition of licensure or permitting under this chapter and shall enforce such compliance.

(b) The department is authorized to promulgate such rules and regulations as necessary in order to carry out its duties under this article."

SECTION 2.

All laws and parts of laws in conflict with this Act are repealed.